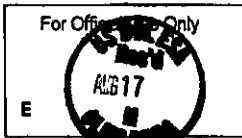


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440.



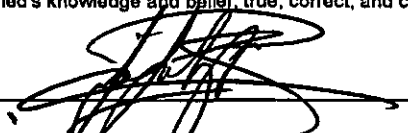
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U - <u>9420</u>	2 Fiscal Year Covered From. <u>1 / 1 / 2004</u> Through <u>12 / 31 / 2004</u>
3 Name and address of person filing Name <u>John P. Amaya</u> P O Box, Bldg, Room No., if any <u>c/o Local 365 UAW</u> Street <u>30-07 39th Avenue</u> City <u>Long Island City</u> State <u>New York</u> ZIP Code + 4 <u>11101</u>	4 Name, file number, and address of labor organization Name <u>Local 365, UAW</u> Labor Organization File Number <u>035429</u> P O Box, Building and Room Number, if any Street <u>30-07 39th Avenue</u> City <u>Long Island City</u> State <u>New York</u> ZIP Code + 4 <u>11101</u>
5 Position in labor organization <u>Trustee</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name, if any) Name Trade Name, if any P O Box, Bldg, Room No., if any Street City State ZIP Code + 4	7 a Nature of Interest, Transaction, or Income 7 b Amount

Signature

15 Signature and verification The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete (See the section on penalties in the instructions)		
Signed 	On <u>8/12/05</u> Date	<u>718-392-3600</u> Telephone Number

Name of Person Filing <b>John Amaya</b>	File Number U-
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**B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested**

<b>8 Name and address of Business (including trade name, if any)</b>  Name <b>Local 365 UAW Pension Fund</b>  Trade Name, if any _____  P O Box, Bldg, Room No, if any _____  Street <b>30-07 39th Avenue</b>  City <b>Long Island City</b>  State <b>New York</b> ZIP Code + 4 <b>11101</b>	<b>9 Business deals with</b>  <input checked="" type="checkbox"/> <b>a Labor Organization</b>  <input type="checkbox"/> <b>b Trust</b>  <input type="checkbox"/> <b>c Employer</b>
<b>10 If 9 b or 9 c is checked give trust or employer's name</b>  Name _____  Trade Name, if any _____  P O Box, Bldg, Room No, if any _____  Street _____  City _____  State _____ ZIP Code + 4 _____	<b>11 a Nature of such dealing</b> <b>Local 365 Pension Fund is a trust in which Local 365 is interested under Section 3 (1) of the LMRDA</b>  <hr/> <b>11 b Approximate dollar value of such dealing</b> <span style="float: right;"><b>\$166,000,000</b></span>  <b>12 a Nature of interest held or income received</b> <b>Gross salary received as Administrator of the Local 365 UAW Pension Fund</b>  <div style="text-align: right;"> <b>12 b Amount</b> <span style="float: right;"><b>\$31,363</b></span> </div>

<b>C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value</b>	
<b>13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any)</b>  Name _____  Trade Name, if any _____  P O Box, Bldg, Room No, if any _____  Street _____  City _____  State _____ ZIP Code + 4 _____	<b>14 a Nature of payment</b>  <div style="height: 100px; border: 1px solid black;"></div>
<b>13 b Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b>	<b>14 b Amount of payment.</b> <span style="float: right;">_____</span>

Name of Person Filing John Amaya

File Number U-

## Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name, if any)

Name Local 365 UAW Pension Fund

Trade Name, if any

P O Box, Bldg, Room No, if any

Street 30-07 39th Avenue

City Long Island City

State New York

ZIP Code + 4 11101

## 9 Business deals with

☒ a Labor Organization

b Trust

c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name, if any

P O Box, Bldg, Room No, if any

Street

City

State

ZIP Code + 4

## 11 a Nature of such dealing

Local 365 Pension Fund is a trust in which Local 365 is interested under Section 3(1) of the LMRDA

## 11 b Approximate dollar value of such dealing

\$166,000,000

## 12 a Nature of interest held or income received

Reimbursement of expenses and value of meals, hotel and airfare related to attendance at educational conferences/seminars

## 12 b Amount

\$5,190

Name of Person Filing John Amaya

File Number U-

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any)

Name Seix Investment

Trade Name, if any

P O Box, Bldg, Room No, if any

Street 10 Mountainview Road

City Upper Saddle River

State New Jersey

ZIP Code + 4

9 Business deals with

☐ a Labor Organization

☒ b Trust

☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Local 365 UAW Pension Fund

Trade Name, if any

P O Box, Bldg, Room No, if any

Street 30-07 39th Avenue

City Long Island City

State New York

ZIP Code + 4 11101

11 a Nature of such dealing

Seix Investment provides investment management services to the Pension Fund

11 b Approximate dollar value of such dealing

\$36,500,000

12 a Nature of interest held or income received

Value of meals provided at Board of Trustees meeting held on 5/14/2004

12 b Amount

\$110

## Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name, if any)

Name Bessemer Trust

Trade Name, if any

P O Box, Bldg, Room No, if any

Street 630 Fifth Avenue

City New York

State New York

ZIP Code + 4 10111

## 9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name Local 365 UAW Pension Fund

Trade Name, if any

P O Box, Bldg, Room No, if any

Street 30-07 39th Avenue

City Long Island City

State New York

ZIP Code + 4 11101

## 11 a Nature of such dealing

Bessemer Trust provides investment management services to the Pension Fund

## 11 b Approximate dollar value of such dealing

\$13,600,000

## 12 a Nature of interest held or income received

Value of meals provided at Board of Trustees meeting held on 2/10/2004

## 12 b Amount

Name of Person Filing John Amaya

File Number U-

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any)

Name Banc One Investments

Trade Name, if any

P O Box, Bldg, Room No, if any

Street 153 West 51st Street

City New York

State New York

ZIP Code + 4 18019

9 Business deals with

a Labor Organization

☒ b Trust

c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Local 365 UAW Pension Fund

Trade Name, if any

P O Box, Bldg, Room No, if any

Street 30-07 39th Avenue

City Long Island City

State New York

ZIP Code + 4 11101

11 a Nature of such dealing

Banc One Investments provides investment management services to the Pension Fund

11 b Approximate dollar value of such dealing

\$37,500,000

12 a Nature of interest held or income received

Value of meals provided at Board of Trustees meeting held on 8/6/2004.

12 b Amount

Name of Person Filing John Amaya

File Number U-

## Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name, if any)

Name Amalgamated Bank

Trade Name, if any

P O Box, Bldg, Room No, if any

Street 11-15 Union Square West

City New York

State New York

ZIP Code + 4 10003

## 9 Business deals with

a Labor Organization

☒ b Trust

c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name Local 365 UAW Pension Fund

Trade Name, if any

P O Box, Bldg, Room No, if any

Street 30-07 39th Avenue

City Long Island City

State New York

ZIP Code + 4 11101

## 11 a Nature of such dealing

Amalgamated Bank provides custodial and investment management services to the Pension Fund

## 11 b Approximate dollar value of such dealing

\$12,800,000

12 a Nature of interest held or income received  
Value of gift (blanket)

## 12 b Amount

\$38

## Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name, if any)

Name Local 365 UAW Welfare Fund

Trade Name, if any

P O Box, Bldg, Room No, if any

Street 30-07 39th Avenue

City Long Island City

State New York

ZIP Code + 4 11101

## 9 Business deals with

☒ a Labor Organization

b Trust

c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name, if any

P O Box, Bldg, Room No, if any

Street

City

State

ZIP Code + 4

## 11 a Nature of such dealing

Local 365 Welfare Fund is a trust in which Local 365 is interested under Section 3(1) of the LMRDA

## 11 b Approximate dollar value of such dealing

\$5,780,000.

## 12 a Nature of interest held or income received

Gross salary received as Administrator of the Local 365 UAW Welfare Fund

## 12 b Amount

\$31,363